

Peter Deng & Associates

CPA For Minority Communities

1885 University Ave W., Suite 269

St Paul, MN 55104

Phone: 651-917-0809 Cell: 612-702-7374

Fax: 651-917-0851

Website: www.dengcpa.com

Email: info@dengcpa.com

INDIVIDUAL TAX RETURN INFORMATION

Client Name: _____ Phone: _____ (D) _____ (E)

Formfmt\toclit\taxinfo

Checklist (Please attach separate sheet as needed to provide detailed information)

_____ Completed Tax Organizer, if you have one

_____ A copy of last year tax return with date of birth for everyone, if you are our new client
Each person's Official Name, Social Security Number, & Date of Birth

_____ All W-2s received

_____ All interest & dividends income and other 1099 Statements

_____ Mortgage interest statement

_____ Property tax statement

_____ Auto tag fees

_____ Charitable donations, and medical expenses if substantial amount

_____ Stock, mutual fund, or real estate sales: Provide purchase dates and prices for each

_____ Home or Small Business: Use our worksheet to fill out income and all expenses

_____ Rental Property: Use our worksheet to fill out income and expenses for each property

_____ Copy of Schedule K-1 for partnerships and S corporations

Other Information if there is any

_____ Moving Expenses

_____ Day care providers' name, address, FID or SS#, & Amount

_____ Child K1-K12 education related expenses detail

_____ Rental property tax from your landlord

_____ Want to put money in IRA if qualifying? How much?

_____ College education expenses? Which year, for whom, and how much?

_____ Student loan interest paid for the year

_____ Bank Name, Routing#, & Acct# _____

Any question? Please write here:

